In the United States Court of Federal Claims

LHASHEA LYNN HARMON El, et al))
Plaintiff(s),	Case No. 1:20-CV-01307 -MHS
V.	Judge
THE UNITED STATES,	
Defendant.	
Application to Proceed In Forma Pauperis	
prepay fees, costs, or give security thereof, I state the of said proceedings or to give security thereof, and 1915.	
1. Are you incarcerated? Yes No (In I am being held at:	f the answer is no, go to question 2.)
Do you receive any payment from this institution Monthly amount:	0 0
I have attached a certified copy of my trust f the six (6)-month period immediately prece U.S.C. § 1915(a)(2).	fund account statement (or institutional equivalent) for ding the filing of this complaint, as required by 28
I have attached a "Prisoner Authorization for to deduct the filing fee from my account in of my account statements for the past six (6	rm" authorizing the Facility where I am incarcerated installments and to send to the court certified copies) months.
2. Are you currently employed? Yes N a. If the answer is yes, give the name and salary or wages per month (both gross a	address of your employer and state the amount of your

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b. If the answer is no, state the date of last employment and the amount of your salary or wages per month (both gross and net).

3.	Within the past twelve (12) months, have you received any money from the following sources? a. Business, profession, or other form of self-employment? b. Rent payments, interest, or dividends? c. Pensions, annuities, or life insurance payments? d. Gifts or inheritances? e. Any other sources?
	If the answer to any of the above is yes, describe each source of money and the amount received in the last twelve (12) months, and what you expect to receive in the future.
	Expens are covered by Clair, Food, Rossen, Bevard, etc
	If the answer is no to all of the questions above, explain how you are paying your expenses.
	All Living Expenses Covered by Clain
4.	How much money do you have in cash or in a checking, savings, or inmate account?
	O vowof poverty taken in 2013
5.	Do you own any automobiles, real estate, stocks, bonds, securities, trusts, jewelry, art work, or other financial instruments or items of value, including any items of value held in someone else's name? If so, describe each property and its approximate value.
	Expenses Daid by Clan
6.	Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of each monthly expense.
7.	List any persons dependent upon you for support, your relationship to those persons, and how much you contribute toward their support.
8.	Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable.
	Edavit: I declare under penalty of perjury that the foregoing is true and correct and that a false ement may result in dismissal of my complaint.
10	(Date) (Date) (Date) (Date)
	Bend HE MEL.
6	Prison Identification # (if incarcerated) Print Name (Last, First, MI)



October 29, 2020

Office of the Clerk U.S. Court of Federal Claims 717 Madison Place, NW Washington, DC 20439

Case: Rhashea Lynn Harmon'El, et al. vs. The United States

Docket No: 120-CV-01307-MHS

To the Clerk of the United States Court of Federal Claims:

Enclosed, please find a completed *In Forma Pauperis* Document for the filing of the above referenced case.

Thank you for your attention to this matter.

Regards.

Chief White Owl

/Enclosure

XI CHIN CLAN PO BOX 6666 WOOD BRIDGE VA 22195





OFFICE OF THE CLERK
US COUNT OF FEDERAL CLAIMS
717 MADISON PLACE NW
WASHINGTON DE 20439

